

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
6						
7						
8						
9		2				
10						
11						
12						
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28						
29						
30		2				
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45						
46						
47						
48						
49						
50						
TOTAL IND.			↓		↓	
TOTAL DEP.		↓	↓	↓	↓	↓
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		2				
52						
53						
54						
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95						
96						
97						
98						
99						
100						
TOTAL IND.		3	↓		↓	
TOTAL DEP.		63	↓		↓	
TOTAL CLAIMS		66				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS